EXHIBIT A

CERTIFICATION REGARDING COMPLIANCE WITH SECTION 188.325, RSMO

Regarding performing, inducing, or assisting in the performing or inducing of or referring for abortions

The vendor certifies, by submission of the proposal and by signing below, that the vendor is not an organization, or an affiliate of organizations, that "perform or induce, assist in the performing or inducing of or refer for abortions".

Laura	Lamb	EXECUTIVE DIFFEC	tor	
Name and Title of	Authorized Repres	sentative		
(Varina	Panno		Ali logg	
	OWNER -		() (1) () () () () () () () () () () () () ()	
Signature			Date '	

EXHIBIT B

VENDOR INFORMATION

	ut the vendor's organization:

- Provide a brief company history, including the founding date and number of years in business as currently constituted.
- Describe the nature of the vendor's business, type of services performed, etc. Identify the vendor's website address, if any.
- Provide a list of and a short summary of information regarding the vendor's current contracts for similar services.
- 4. List, identify, and provide reasons for each contract/client gained and lost in the past two (2) years.
- 5. In the table below, indicate if the vendor is a not-for-profit entity that promotes one or more of the following four (4) purposes established by Congress under 42 U.S.C. Section 601 of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. If a not-for-profit entity, describe past experience relative to the four (4) purposes.

Not-for-profit entity that promotes one or more of the following (4) purposes: X YES NO		
Purposes Identify specific information about experience:	Clearly identify and describe the experience	
the homes of relatives	105	
Ending the dependence of needy parents on government benefits by promoting job preparation, work, and marriage	4CS ·	
Preventing and reducing the incidence of out-of- wedlock pregnancies and establish annual numerical goals for preventing and reducing the incidence of these pregnancies		
Encouraging the formation and maintenance of two-parent families		

- 6. Describe the structure of the organization including any hoard of directors, partners, top departmental management, corporate organization, corporate trade affiliations, any parent/subsidiary affiliations with other firms, etc.
- 7. Provide a list summarizing any pending or final legal proceedings involving you or your company that took place in any court of law, administrative tribunal or alternative dispute resolution process that was filed, settled or gone to final judgment within the last three (3) years. The summary need not disclose confidential information of a disputed allegation of fact or law, but must contain the allegations made and/or contested or findings of the court of law, tribunal or dispute resolution process. Failure to provide a full and accurate summary of legal proceedings may result in rejection of the proposal or termination of any subsequent contract.

1. Organization History:

Midtown was established in 1982 by Catholic Charities. Midtown was able to provide comprehensive services and direct assistance to 8 neighborhoods. This included year-round youth activities, community health initiatives and the city's first welfare-to-work program. To date, Midtown has engaged over 3,448 people in crucial support and services, serving as a reliable source for assistance and family support.

In January 2017, we became an independent 501(c) 3 organization. Our core goals are to provide children & teenagers with a safe environment that promotes healthy growth and development, to provide outreach to pregnant women & newborns by delivering pre & post-natal education in order to reduce the area's infant mortality, to provide the men & women in our community with a safe, inclusive & productive environment, to create a welcoming environment for open dialogue & discussions to foster community involvement & growth, & to break down barriers created by poverty, isolation, & prejudice.

Family P.R.I.D.E. (Parent Resources, Infant Development and Environment) is our critical outreach effort to help to pregnant women and newborns. It began in 1993 in response to very high infant mortality rates in our service area. Family P.R.I.D.E. provides outreach in homes, the community and with health care organizations to find and connect women to educational services and basic needs for young families. We are proud to note that this type of engagement is working. Though there are still unacceptably high infant mortality rates in St. Louis, 98% of babies born to our participants have been healthy! In 2017, we aim to help 30 mothers and increase participation to 50 women in 2018.

2. Services Performed:

Home Visits

Home visits are made to every family twice a month. The purpose of home visits is to address each client's individual needs, obstacles, concerns, health care needs, goals, etc. Individualized service plans are developed to work towards parent's goal. Home visits address social, economic, or emotional crises and build on parents' strengths.

Proud Start Workshops

Proud Start Workshops aim to create a comfortable, supportive and fun place for expecting and new mothers to discuss a range of pertinent topics. This education provides our parents with important information that helps them work towards a healthier pregnancy and lifestyle for their infant. There is a focus on prenatal care, smoking, alcohol and un-prescribed drug use, second hand smoke, post partum depression and weight control and nutrition.

Friends Around the Neighborhood

Friends Around the Neighborhood playgroups are designed to contribute to the cognitive, physical, social and emotional well-being of our infants. A playgroup can significantly help children develop social skills, gain independence and build self-confidence.

Proud Start Parenting Association

PSPA is designed to focus on development during these early years of childhood. In the early years of childhood, the basis of intelligence, personality, social behavior and capacity to learn and nurture oneself is formed. The quality of this development determines one's competence and ability to function in these capacities as an adult. Research has shown that brain development is most rapid during the early years of childhood. If the quality of stimulation is insufficient, the child's development can be seriously hindered. PSPA wants to help you create and nurture a strong early development for your child.

Family PRIDE Store

Family PRIDE offers a store monthly to participating families. Families will receive Family PRIDE Bucks for each playgroup, workshop or home visit contact. During the store, families can reimburse their Family PRIDE Bucks for needed supplies for their newborns/infants, such as diapers, wipes, formula, clothing, bottles, baby friendly hygiene products, etc.

- 3. No current contracts for similar services.
- 4. No contracts lost in the past two years.

As an agency, we separated from Catholic Charities at the end of 2016. They received cuts in funding from the ACA and United Way and therefore had to close many agencies. Catholic Charities provided our organization with the opportunity to move forward due to our strong programs and long term presence in the community.

- 5. Our organization works with families on or below the federal poverty level. Using a variety of programming, as well as connections to outside resources, our staff works to help offer our community members access to connections and resources to realize their full value and potential. Our organization works to empower our community members and work towards a stronger and self-sufficient future.
- Included the list of Board Members, their roles, occupations and place of employment.

Included organizational chart.

Midtown's community partners include Voices of Women, City Greens Market, St. Cronan's Parish, SLU, St. Louis College of Pharmacy, SSM, Park Central

Development Corporation, University of Missouri Extension, Forest Park Development Corporation and BJC Healthy Start Healthy Communitities.

7. No legal proceedings involving our organization.



Midtown Community Services (D.B.A.) 501@3 Midtown Neighborhood Opportunities Corporation

Board of Directors

Tim Ripplinger

Board President

Mitigation Specialist

Missouri State Public Defenders

Lizet Dickinson

Board Vice President

Attorney/Mitigation Specialist

Missouri State Public Defenders

Derek Dickinson

Treasurer

Attorney/Financial Consultant

Country Financial

Sr. Chabanel Mathison Secretary

Parish Administrator

St. Cronan's Parish

Bob Helmsing

Board Member

Retired owner

Lawrence Fabrics

Marcy Soda

Board Member

Retired Non Profit

Executive Director



Midtown Community Services (D.B.A.) 501@3 Midtown Neighborhood Opportunities Corporation

Armella Geier

Board Member

Retired Social Worker

Matt Borst

Board Member

Instructor

University College

Bill Patterson

Board Member

Senior Director-Solution

Benefits

Express Scripts

Phil Milner

Board Member

IT Specialist

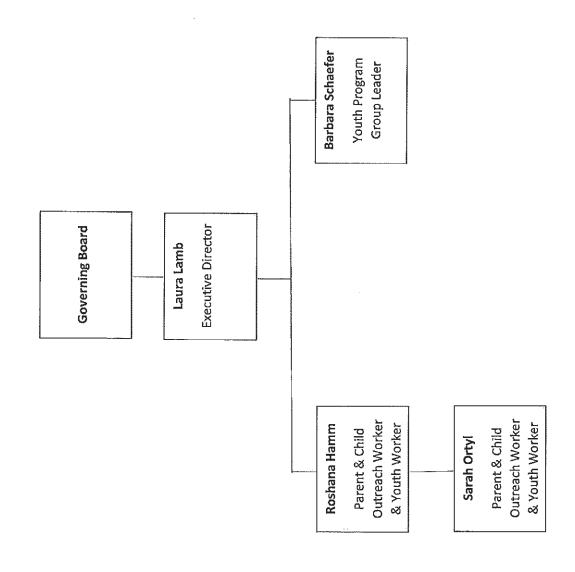
Wells Fargo

Lisa VonderHaar

Board Member

Retired Educator

Midtown Neighborhood Opportunities Corporation (501 (c)3) Midtown Community Services (D.B.A.) Organizational Chart



Effective 1/3/2017

EXHIBIT C

CERTIFICATION REGARDING EXEMPTION FROM INCOME TAXATION

The vendor certifies, by submission of the proposal and by signing below, that the vendor is "exempt from income taxation pursuant to the United States Internal Revenue Code".

Laura	Lamb	Executive	Pirector	
Name and Title	of Authorized Re	epresentative		
(Q)	a Am)		1
	a Jetmy	<u> </u>		6/6/017
Signature				Date

EXHIBIT D

CURRENT/PRIOR EXPERIENCE

The vendor should copy and complete this form documenting the vendor and subcontractor's current/prior experience considered relevant to the services required herein. In addition, the vendor is advised that if the contact person listed for verification of services is unable to be reached during the evaluation, the listed experience may not be considered.

Vendor Name or Subcontractor Name: (if reference is for a Subcontractor):				
Refer	Reference Information (Current/Prior Services Performed For:)			
Name of Reference Company/Client:				
Address of Reference Company/Client:				
Reference Contact Person Name, Phone #, and E-mail Address:				
Title/Name of Service/Contract				
Dates of Service/Contract:				
If service/contract has terminated, specify reason:				
Size of Service such as: Number of Individuals Being Served Total Annual Value/Volume				
Size of Service/Contract (in terms of vendor's total amount of business)				
Description of Services Performed, such as: ✓ Population Served ✓ Type of Services Performed ✓ Geographic Area Served ✓ Vendor's specific duties and strategic objective				
Personnel Assigned to Service/Contract (include position title):				

This is the first time participating as a subnontractor.

EXHIBIT E

(Copy and complete this table for each key person proposed. Titles of personnel should be consistent with titles referenced throughout the RFP.)

Title of Po	sition: EXECUTIVE DIRECTOR
Name of Person:	Laura Lamb
Educational Degree (s): include college or university, major, and dates	TRUMAN STATE UNIVERSITY, BS PSOJETIOLOGY, BS SOCIOLOGY, 200 - cally Louis University, Master of Social Work, 201-3
License(s)/Certification(s), #(s), expiration date(s), if applicable:	LMSW, NO. 20170087910, exp. 9/30/2016
Specialized Training Completed.	
# of years experience in area of service proposed to provide;	4 years
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employee 4 years
Describe this person's responsibilities over the past 12 months.	Responsibilities included on separate sheet.
Previous employer(s), positions, and dates	Justine PETERSEN, credit counselor of Practicum Students, August 2012-July 2013.
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
Early childhood development Family/marital counseling	group toused on this once a moniv, every month,
✓ Social work ✓ Case management ✓ Program administration	CONTROLLY PROVIDED WITH CONTINUAL ASSISTANCE WAS A COSE MUNCOPINENT WITH ID CLIENTS TWILL A MONTH EVERYPHINTH WAS A PROPERTY SINCE

Midtown Neighborhood Opportunities Corporation

Job title	Director
Reports to	Governing Board

Job purpose

Responsible for the development, implementation and supervision of programs, activities, services and resources of the organization. Explores funding sources for programs. Responsible for implementation of Midtown's mission within the community.

Duties and responsibilities

- Supervising staff and volunteers.
- Ensuring that programs operate according to accreditation and agency standards.
- Reviews, interprets and updates policies and procedures as necessary.
- Develops goals, objectives, measures of productivity and effectiveness for services and programs.
- Maintains essential reports to measure effectiveness of program performance.
- Develops budget for optimal personnel, expenses and capital resources.
- Monitor expenses and income, making adjustments to stay within budget.
- Assisting with resource development, such as grant applications and fund-raising.
- Acting as a liaison with St. Cronan's Parish.
- Guiding and supporting Midtown's Governing Board.
- Serving as Midtown's representative to external stakeholders.
- Collaborates with and promotes community relationships with local public and private agencies.
- Actively works at maintain good rapport and professional working relationships with staff through communication and staff development.
- Witnesses the mission of Midtown Neighborhood Opportunities Corporation.
- Case manager for 10 pregnant and new mothers. Work to achieve healthy pregnancies and first years of life, help mother to set and achieve personal and family goals and connect them to additional resources.

EXHIBIT E

(Copy and complete this table for each key person proposed. Titles of personnel should be consistent with titles referenced throughout the RFP.)

Title of Pos	sition: Parent Child Health Outleach Worker	
Name of Person:	Sarah ortyl	
Educational Degree (s): include college or university, major, and dates	BA PSYCHOLOGY & WOMEND STUDIES SOINT LOVIS UNITERSITY MA MORRIAGE & FORMILY Therapy SMINI LOUIS UNIVERSITY	
License(s)/Certification(s), #(s), expiration date(s), if applicable:		
Specialized Training Completed.	Level 1 dottman institute certified	
# of years experience in area of service proposed to provide:	3.5 YEARS	
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employee For 3.5 years	
Describe this person's responsibilities over the past 12 months.	Responsibilities included on separate	
Previous employer(s), positions, and dates	Birthright, intern	
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience	
 ✓ Early childhood development ✓ Family/marital counseling ✓ Social work ✓ Case management ✓ Program administration 	Group featsing on This once a minth, every intention, help exercised during masters program 2011 - 2013. Chients during masters with continuous assistance where case include the morning where the provide a provide once a month that there I mount on partially chients a month that there I mounth on partially chients a month that there I mounth on partially chients a month that there I mounth the partially chients a month that the mentally chients and partially chients a month that the mentally chients are the mounth that the mentally chients are partially chients and partially chients are partially chients and partially chients as a month that the mentally chients are partially chients and partially chients are partially chients and partially chients are provided and provided and partially chients are provided and pro	

EXHIBIT E

(Copy and complete this table for each key person proposed. Titles of personnel should be consistent with titles referenced throughout the RFP.)

Title of Pos	sition: Parent Child Health Outreach Worker
Name of Person:	Roshana Hammosuman Environmental Studio
Educational Degree (s): include college or university, major, and dates	MISSOWY BUPTER MUSTERS HUNDERS OF ALTS AUTOMIN
License(s)/Certification(s), #(s), expiration date(s), if applicable:	counsil ing
Specialized Training Completed.	
# of years experience in area of service proposed to provide;	10
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employee FOR 3.5 years
Describe this person's responsibilities over the past 12 months.	Responsibilities included on separate sheet.
Previous employer(s), positions, and dates	EDWORTH CHILDREN & FAMILY STUDES COTTON WOOD RESIDENTIAL EXERY CHILD'S HOPE ISIG BIDTILE BIG SISTER WYDAN REMANORAL HEALIN LAND
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
Early childhood development Family/marital counseling	rorental unil deducators school pased program at MEM.
 ✓ Social work ✓ Case management ✓ Program administration 	All jobs case MMOOF TO alinks 20 month, every month

Midtown Neighborhood Opportunities Corporation

Job title	Parent Child Health Outreach Worker
Reports to	Director

Job purpose

Full-time position within the Family PRIDE Program working with individuals and families in developing and organizing a plan of action to meet assessed service requirements, particularly in the areas of children and family health. Works with youth, elders, pregnant women, children, refugees, immigrants, etc.

Duties and responsibilities

- Completes intake and assessment with individuals and families being served by the agency in a timely manner.
- Keeps records and reports.
- Define, plan, execute, and document social growth and development groups and educational workshops for pregnant and new moms.
- Complete home visits and follow-ups as required meeting client needs.
- Advocate and network outside of agency to meet client needs.
- Meet program goals within program guidelines.
- Create a safe, friendly, and fun environment for all participants and families by implementing a core curriculum that will allow for productive activities and positive work culture.
- Outreach to low-income families and youth in the area and educate them on the programs available at Midtown.
- Accountable for caseload as determined by program manager or director.
- Other duties as assigned by director.

EXHIBIT K, continued

(Complete the following if you DO NOT have the E-Verify documentation and a current Affidavit of Work Authorization already on file with the State of Missouri. If completing Box B, do not complete Box C.)

BOX B - CURRENT BUSIN	IESS ENTITY STATUS
Midtown NCIGN bornood Opportur I certify that Worporation (Business Entity N	VIT(65 Jame) MEETS the definition of a business entity as
defined in section 285.525, RSMo pertaining to section 28	
	0 0 0
Laura Lamb	delua tombi
Authorized Business Entity Representative's Name (Please Print)	Authorized Business Entity Representative's Signature
, , , , , , , , , , , , , , , , , , , ,	,
Midtown Mighborhood Opportunities Business Entity Name Corporation	4/23/2017
Business Entity Name (1) POT STTOY	Date
bura.lamb@midtomcs.org	
E-Mail Address	
As a business entity, the vendor must perform/provide eac	h of the following. The vendor should check each to
verify completion/submission of all of the following:	ii or mo ronoving. The relieux sitema enten enten e
Enroll and participate in the E-Verify federal we	ork authorization program (Website: 4218; Email: <u>e-verify@dhs.gov</u>) with respect to the
	who are proposed to work in connection with the
services required herein;	
AN	
	's/individual's enrollment and participation in the E-
Employment Eligibility Verification page listing	cumentation shall include EITHER the E-Verify g the vendor's name and company ID OR a page from
the E-Verify Memorandum of Understanding (N	AOU) listing the vendor's name and the MOU
signature page completed and signed, at minimu Security – Verification Division. If the signatur	um, by the vendor and the Department of Homeland
company ID, then no additional pages of the MG	OU must be submitted;
AN	ID
- ·	k Authorization provided on the next page of this
Exhibit.	

EXHIBIT K, continued

The vendor who meets the section 285.525, RSMo, definition of a business entity must complete and return the

AFFIDAVIT OF WORK AUTHORIZATION:

following Affidavit of Work Authorization,
Comes now AMM (Name of Business Entity Authorized Representative) as DITCHY (Position/Title) first being duly sworn on my oath, affirm MATAWA ATAMONY AND OPPONING (Business Entity Name) is enrolled and will continue to participate in the E-Verify federal work authorization program with respect to employees hired after enrollment in the program who are proposed to work in connection with the services related to contract(s) with the State of Missouri for the duration of the contract(s), if awarded in accordance with subsection 2 of section 285.530, RSMo. I also affirm that MATAWA NOW NOW WITH Contract (s) are proposed to work in connection with accordance with subsection 2 of section 285.530, RSMo. I also affirm that MATAWA NOW NOW NOW WITH Contract (s) are proposed to work in connection with accordance with subsection 2 of section 285.530, RSMo. I also affirm that MATAWA NOW
In Affirmation thereof, the facts stated above are true and correct. (The undersigned understands that false statements made in this filing are subject to the penalties provided under section 575.040, RSMo.)
Sauva Jawa Laura L
Director Ou 27 2017 Date
E-Mail Address E-Verify Company ID Number
Subscribed and sworn to before me this 27 of Syne 2017. I am Comprised and a patent public within the Country of State
Commissioned as a notary public within the County of State of THAMPORCOUNTY) MISSOURI , and my commission expires on 2001.
Maddle 6/27/17 Signature of Notes: Date
MEAGAN HUDDLESTON Notary Public - Notary Seal

MEAGAN HUDDLESTON
Notary Public - Notary Seal
STATE OF MISSOURI
St. Louis City
My Commission Expires: Jan. 9, 2021
Commission # 17372649

1





Company ID Number: 1209870

Approved by:

E-Verify Employer Agent Employer		
Midtown Neighborhood Opportunities Corporation		
Name (Please Type or Print)	Title	
Laura Lamb		
Signature	Date	
Electronically Signed	06/27/2017	
Department of Homeland Security – Verificat	on Division	
Name (Please Type or Print)	Title	
USCIS Verification Division		
Signature	Date	
Electronically Signed	06/27/2017	





Company ID Number: 1209870

Information Required for the E-Verify Program Information relating to your Company:	
Company Facility Address	1202 S Boyle Saint Louis, MO 63110
Company Alternate Address	
County or Parish	SAINT LOUIS CITY
Employer Identification Number	812818972
North American Industry Classification Systems Code	624
Parent Company	
Number of Employees	1 to 4
Number of Sites Verified for	1





Company ID Number: 1209870

Are you verifying for more than 1 site? If yes, please provide the number of sites verified for in each State:

MISSOURI

1 site(s)